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☐ 1: J Immunol 1996 May 15;156(10):3911-8

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**Enhanced tumor outgrowth after peptide vaccination.
Functional deletion of tumor-specific CTL induced by
peptide vaccination can lead to the inability to reject
tumors.**

Toes RE, Blom RJ, Offringa R, Kast WM, Melief CJ.

Department of Immunohematology and Blood Bank, University
Hospital, Leiden, The Netherlands.

CTL can play an important role in the defense against tumors. Protective CTL-mediated immunity can be established in animal tumor models after vaccination with synthetic peptides representing CTL epitopes. We now report that immunization with synthetic peptides can also lead to CTL tolerance associated with the inability to reject tumors. B6 tumor cells transformed by the human adenovirus early region 1 (Ad5E1) present an Ad5E1A- and an Ad5E1B-encoded CTL epitope to the immune system. CTL clones directed against either of these epitopes are able to eradicate established Ad5E1-induced tumors, showing that these CTL epitopes are targets of CTL that can mediate tumor regression. Here, we show that protective immunity against Ad5E1-expressing tumor cells can be established by immunization with Ad5E1-transformed cells and with an adenovirus vector containing the Ad5E1 region. Protective immunity, in either case, is associated with specific CTL memory. To test whether vaccination with synthetic peptides leads to protection against Ad5E1-expressing tumor cells, we vaccinated mice s.c. with a low dose of the Ad5E1B peptide. This peptide was chosen because the CTL response against the Ad5E1B-encoded CTL epitope contributes most to the antitumor response in B6 mice after vaccination with Ad5E1-transformed cells. Ad5E1B peptide-vaccinated mice were not protected against the outgrowth of Ad5E1-expressing tumor cells, but instead were no longer able to reject a tumor

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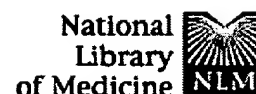
inoculum that was rejected by nonvaccinated mice. Moreover, the protection induced by tumor cell vaccination against Ad5E1B-expressing tumors was gone when the Ad5E1B-encoded CTL epitope was injected a few days before tumor challenge. This is associated with peptide-induced tolerance of Ad5E1B-specific CTL activity. These findings are relevant for the design of therapeutic approaches against both malignancies and T cell-mediated autoimmune diseases.

PMID: 8621930 [PubMed - indexed for MEDLINE]

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T-cells with specificity against neuroblastoma cells activated by dendritic cells.

AUTHOR: Klein-Franke A(a); Ertle F(a); Berkutzky T(a); Peters H

AUTHOR ADDRESS: (a)Pediatrics, University, Goettingen**Germany

JOURNAL: Blood 96 (11 Part 2):p41b November 16, 2000

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SPONSOR: American Society of Hematology

ISSN: 0006-4971

RECORD TYPE: Abstract

LANGUAGE: English

SUMMARY LANGUAGE: English

ABSTRACT: Introduction: Neuroblastoma is the most frequent solid tumor in children with a poor prognosis despite intensive, multimodal therapy. To improve the outcome new therapeutic approaches are necessary. One new approach in tumor therapy is the activation of cytotoxic T-cells against tumor cells by Dendritic Cells which are by far the most effective Antigen Presenting Cells (APC). Materials and Methods: We used the Neuroblastoma line SK-N-LO and buffy coats of HLA-I matched blood donors as a source for monocytes and T-cells. We isolated the monocytes by plastic adherence and differentiated them into DC by cultivation in the presence of GM-CSF and IL 4 (100 U/ml) and IFN gamma (50 U/ml) for 8 days. Mixed Tumor/Lymphocyte Culture (MLTC) was performed using DC as APC that had either been pulsed with tumor cell lysate or fused to tumor cells by PEG. T-cell proliferation was assessed by ³H-Thymidin incorporation and the cytotoxicity of T-cells was monitored via LDH release from tumor cells (4 hours cocultivation, effector:target ratio 10:1). Results: Without DC no activation of T-cells could be seen. In the presence of DC pulsed with tumor cell lysate T-cells were activated leading to a ³H-Thymidin incorporation of 3100 cpm. T-cell activation by DC/tumor cell hybrids was even more efficient yielding 6400 cpm. In both cases CD8⁺T-cells were selected and could be kept in continuous culture by restimulation with manipulated DC every 14 days, followed by culture in the presence of IL2 for up to four cycles. Freshly activated T-cells lysed 43% of the Neuroblastoma cells, Neuroblastoma cells with different HLA-I formula were not lysed, nor were K562 cells. Lysis of tumor cells was abrogated by a polyclonal rat antibody specific for HLA-I, thus demonstrating the tumor cell lysis to be HLA-I restricted. Discussion: We could activate cytotoxic T-cells against Neuroblastoma cells using Dendritic Cells as APC. Hybrids of DC and tumor cells were even more effective. Target cell lysis was antigen specific, thus the Neuroblastoma cells can be expected to have tumor associated antigens. Activated T-cells killed Neuroblastoma cells in a HLA-I dependent manner. This is particularly interesting as Neuroblastoma cells bear only very small amounts of HLA-I molecules on their surface. Despite of this Neuroblastoma cells are obviously a suitable target for activated T-cells. These results could lead to clinical studies in the therapy of Neuroblastoma using DC for the activation of tumor specific T-cells.